

## PARKS AND RECREATION DEPARTMENT REGISTRATION FORM

MAIL IN REGISTRATION: Parks & Recreation Office 3801 S. Pine Island Road, 33328 954-797-1145 WALK IN REGISTRATION: Pine Island Multipurpose Center 3801 South Pine Island Road 954-327-3941

WALK IN REGISTRATION: Pine Island Fitness & Aquatics Center 3800 SW 92nd Avenue 954-327-3926

PARTICIPANT & REGISTRATION INFORMATION					
Participant Last Name: First Name:			MI:		
Date of Birth:	Age:	Circle one:	Male Female	Previous Coach Yes No	
Recreation Activity:	Fee:	Location of A	Activity:	BAMFORD SPORTS COMPLEX	
PARENT/GUARDIAN INFORMATION: Please print in blue or black ink.					
PRIMARY Parent/Guardian's Name:	In what division do you want your child to play?  (Please specify one division)				
Address:					
City State Zip				ge 4 Age 5 Age 6	
Cell Phone: Ho	Home Phone:			ge 7 Age 8 Age 9 ge 10 Age 11 Age 12	
E-mail Address: Email addresses will only be used for the purposes of providing activity information and registration information from the Town of Davie.  Age 13 Age 14 Age 15-16					
EMERGENCY CONTACT: (Other than parent/guardian.)		HOLD HARMLESS AGREEMENT			
Emergency Contact:		NOTICE TO THE MINOR CHILD'S NATURAL GUARDIAN READ THIS FORM COMPLETELY AND CAREFULLY. YOU ARE AGREEING TO LET YOUR MINOR CHILD ENGAGE IN A POTENTIALLY DANGEROUS AC- TIVITY. YOU ARE AGREEING THAT, EVEN IF THE TOWN OF DAVIE USES REASONABLE CARE IN PROVIDING THIS ACTIVITY, THERE IS A CHANCE YOUR CHILD MAY BE SERIOUSLY INJURED OR KILLED BY PARTICIPATING IN THIS ACTIVITY BECAUSE THERE ARE CERTAIN DANGERS INHERENT IN THE ACTIVITY WHICH CANNOT BE AVOIDED OR ELIMINATED. BY SIGN- ING THIS FORM YOU ARE GIVING UP YOUR CHILD'S RIGHT AND YOUR RIGHT TO RECOVER FROM THE TOWN OF DAVIE IN A LAWSUIT FOR ANY PERSONAL INJURY, INCLUDING DEATH, TO YOUR CHILD OR ANY PROP- ERTY DAMAGE THAT RESULTS FROM THE RISKS THAT ARE A NATURAL PART OF THE ACTIVITY. YOU HAVE THE RIGHT TO REFUSE TO SIGN THIS FORM, AND THE TOWN OF DAVIE HAS THE RIGHT TO REFUSE TO LET YOUR CHILD PARTICIPATE IF YOU DO NOT SIGN THIS FORM.			
Phone Number:					
THIS AGREEMENT WAIVES LEGAL RIGHTS, PLEASE CONSULT AN ATTORNEY IF YOU HAVE ANY QUESTIONS  The UNDERSIGNED PARTICIPANT and/or his guardian, in consideration for the Town of Davie through its Recreation Division for providing facilities, instruction and supervision while attending any event, scheduled or planned by the Town of Davie does hereby:  1) Assume all risk of possible damage or injury involved through participation in any activity planned by the Town or coordinated by the Town with any other person or entity.  2) Request permission to participate in the activity with full knowledge that said activity could result in permanent damage or injury to me.  3) Agree to release, indemnify and hold harmless the Town of Davie and/or its departments or agents, officers, officials and employees from liability resulting from my participation in said activity, including the Town of Davie's negligence.  4) Specifically agree and acknowledge that any photos, images or videos of my child taken during said activity shall be the sole property of the Town of Davie and as such, the Town shall utilize any and all photos, images or videos taken of my child for any purposes deemed appropriate by the Town of Davie, including, but not limited to, brochures, documents, leaflets, posters, Town Website, Davie TV and any and all approved Town media. No other person or entity shall have the right to utilize said photos or images for private and/or public uses without the expressed consent of the Town.  Parent/Guardian Signature:  Date:  Date:					
PLEASE NOTE THE FOLLOWING POLICIES  All refunds are subject to a second control of the s		IO Administrative Fee		TOWN OF DAVIE USE ONLY	
♦ INCOMPLETE REGISTRATION FORMS WILL NOT BE PROCESSED.	The Davie Parks and Recre	tion Department reserves the right to dismiss or expel any p s for behavior that is detrimental to the programs and facilities. conduct that constitutes safety hazards, physical abuse, mental			
<ul> <li>Proof of residency is required each time you register for an activity/sport.</li> <li>Utility Bill dated within the past 2 months.</li> </ul>	includes, but is not limited to		This wase Method of Payment:		
◆ A copy of the child's birth certificate is required if registering for the first time with the Town of Davie. ◆ Smoking is limited to parki		ng areas when in Town parks conducting sports programs/events. on. (Town Ordinance #2003-13)		Received by (Please Print):	
				Proof of Residency:	
Activities  Cheerleading (Flag) Football (Flag) Fees  Cheerleading (Flag) Football (Flag) Softball fast pitch Softball slow pitch In-Line hockey  Resident Fees  Resident F	Youth Baseball Youth Basketball Youth Soccer 5 on 5 Soccer	Resident       \$75/\$110       No         Resident       \$75/\$100       No         Resident       \$75/\$110       No         Resident       \$75       No	on-Resident \$135	Travel Sports Contact Sports Department 954-327-3928 Adult Softball \$500 Adult Football \$500 Adult Soccer \$500 Adult Hockey \$500 Fall Ball Classic Per Team \$665	